

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (2-21)**  
**STATE: NY**  
**APPLICATION YEAR: 2009**

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**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2009**

[Secs. 504 (d) and 505(a)(3)(4)]

**STATE: NY**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])  
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 41,629,217

A.Preventive and primary care for children:

\$ 12,504,584 ( 30.04 %)

B.Children with special health care needs:

\$ 13,230,181 ( 31.78 %)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 2,293,770 ( 5.51 %)

(The above figure cannot be more than 10%)[Sec. 504(d)]

**2. UNOBLIGATED BALANCE** (Item 15b of SF 424)

\$ 0

**3. STATE MCH FUNDS** (Item 15c of the SF 424)

\$ 390,311,698

**4. LOCAL MCH FUNDS** (Item 15d of SF 424)

\$ 309,987,228

**5. OTHER FUNDS** (Item 15e of SF 424)

\$ 0

**6. PROGRAM INCOME** (Item 15f of SF 424)

\$ 174,723,376

**7. TOTAL STATE MATCH** (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 58,268,752

\$ 875,022,302

**8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)**

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 916,651,519

**9. OTHER FEDERAL FUNDS**

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 150,000

b. SSDI: \$ 100,000

c. CISS: \$ 140,000

d. Abstinence Education: \$ 0

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 1,939,252

j. Education: \$ 23,636,568

k. Other: \$                     

Medicaid Match \$ 9,758,117

Title X-Fam Planning \$ 10,420,000

**10. OTHER FEDERAL FUNDS** (SUBTOTAL of all Funds under item 9)

\$ 46,143,937

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 962,795,456

## FORM NOTES FOR FORM 2

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** FedAlloc\_CSHCN  
**Row Name:** Federal Allocation - Children with special health care needs  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
These funds include local funds from Early Intervention and Early Intervention Respite Care, Dental Health education and health services, primary and preventive health care, lead poisoning, Early Intervention Article 6 funds, and Physically Handicapped Children's Program funds.
2. **Section Number:** Main  
**Field Name:** LocalMCHFunds  
**Row Name:** Local MCH Funds  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Local MCH funds include funds from Early Intervention, Early Intervention Respite care, the Physically Handicapped Children's Program, and local Family Planning. The majority, though, are from local State Aide, which includes Dental Health education and health services, primary and preventive health care, lead poisoning, prenatal care/infant mortality, family planning, Early Intervention Article 6 funds, and local administrative costs for these programs.
3. **Section Number:** Main  
**Field Name:** ProgramIncome  
**Row Name:** Program Income  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Program income includes family planning, Early Intervention, School Health program and Family Health Article 6 revenues.

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: NY**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 42,726,728	\$ 46,657,529	\$ 44,048,128	\$ 40,665,186	\$ 43,450,702	\$ 43,450,702
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 7,258,731	\$ 0	\$ 7,500,000	\$ 3,043,124	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 329,643,258	\$ 347,014,521	\$ 378,564,700	\$ 365,856,081	\$ 388,295,930	\$ 387,035,471
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 264,011,444	\$ 266,309,718	\$ 242,527,827	\$ 261,412,884	\$ 266,309,718	\$ 283,491,639
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 330,962,153	\$ 299,805,166	\$ 274,010,452	\$ 299,360,489	\$ 299,431,541	\$ 286,125,086
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 974,602,314	\$ 959,786,934	\$ 946,651,107	\$ 970,337,764	\$ 997,487,891	\$ 1,000,102,898
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 49,459,819	\$ 46,438,687	\$ 50,506,443	\$ 41,885,193	\$ 44,307,745	\$ 40,019,155
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 1,024,062,133	\$ 1,006,225,621	\$ 997,157,550	\$ 1,012,222,957	\$ 1,041,795,636	\$ 1,040,122,053
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: NY**

	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 41,621,706	\$ 41,629,217	\$ 41,629,217	\$ 0	\$ 41,629,217	\$ 0
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 351,809,825	\$ 347,801,378	\$ 351,565,000	\$ 0	\$ 390,311,698	\$ 0
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 242,471,037	\$ 245,642,140	\$ 361,355,556	\$ 0	\$ 309,987,228	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 268,918,266	\$ 182,431,876	\$ 189,548,660	\$ 0	\$ 174,723,376	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 904,820,834	\$ 817,504,611	\$ 944,098,433	\$ 0	\$ 916,651,519	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 42,076,539	\$ 39,471,805	\$ 40,337,744	\$ 0	\$ 46,143,937	\$ 0
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 946,897,373	\$ 856,976,416	\$ 984,436,177	\$ 0	\$ 962,795,456	\$ 0
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** ProgramIncomeExpended  
**Row Name:** Program Income  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Methodology used to determine program income applied percentages based on analysis done years ago. It had not been updated in a number of years and none of the staff that developed the methodology is available to revise it. Current calculations are based on local government and sub-recipient reported income and therefore is readily retrievable by multiple staff and/or changing staff.
2. **Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
\$2.6M of Federal Abstinence funding not expended as the State declined subsequent awards.

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: NY**

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 53,018,366	\$ 53,487,003	\$ 51,497,820	\$ 52,883,408	\$ 53,904,738	\$ 47,044,245
b. Infants < 1 year old	\$ 204,471,565	\$ 181,024,586	\$ 198,607,402	\$ 208,622,619	\$ 173,879,542	\$ 158,679,430
c. Children 1 to 22 years old	\$ 54,187,889	\$ 75,873,541	\$ 52,633,802	\$ 49,002,057	\$ 139,787,098	\$ 154,144,896
d. Children with Special Healthcare Needs	\$ 572,871,240	\$ 560,329,600	\$ 556,441,521	\$ 572,014,112	\$ 547,371,892	\$ 525,266,481
e. Others	\$ 41,323,138	\$ 37,700,384	\$ 40,138,007	\$ 39,298,680	\$ 30,594,283	\$ 67,047,059
f. Administration	\$ 48,730,116	\$ 51,371,820	\$ 47,332,555	\$ 48,516,888	\$ 51,950,338	\$ 47,920,787
g. SUBTOTAL	\$ 974,602,314	\$ 959,786,934	\$ 946,651,107	\$ 970,337,764	\$ 997,487,891	\$ 1,000,102,898
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 50,000		\$ 0		\$ 0	
d. Abstinence Education	\$ 3,377,584		\$ 3,755,454		\$ 3,614,500	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 900,000		\$ 1,150,161		\$ 3,854,137	
j. Education	\$ 25,063,710		\$ 26,175,777		\$ 26,210,607	
k. Other						
Family Planning	\$ 19,793,525		\$ 19,325,051		\$ 10,528,501	
HRSA-Medical Home	\$ 175,000		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 49,459,819		\$ 50,506,443		\$ 44,307,745	

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: NY**

	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 48,860,325	\$ 45,117,681	\$ 64,999,538	\$ 0	\$ 76,287,545	\$ 0
b. Infants < 1 year old	\$ 185,488,271	\$ 104,879,584	\$ 129,744,213	\$ 0	\$ 46,193,308	\$ 0
c. Children 1 to 22 years old	\$ 54,289,250	\$ 97,346,038	\$ 116,647,102	\$ 0	\$ 125,026,052	\$ 0
d. Children with Special Healthcare Needs	\$ 531,129,829	\$ 498,360,642	\$ 496,870,196	\$ 0	\$ 540,975,612	\$ 0
e. Others	\$ 39,812,117	\$ 43,678,763	\$ 97,300,581	\$ 0	\$ 112,109,458	\$ 0
f. Administration	\$ 45,241,042	\$ 28,121,903	\$ 38,536,803	\$ 0	\$ 16,059,544	\$ 0
g. SUBTOTAL	\$ 904,820,834	\$ 817,504,611	\$ 944,098,433	\$ 0	\$ 916,651,519	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 150,000		\$ 150,000	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 0		\$ 0		\$ 140,000	
d. Abstinence Education	\$ 3,675,827		\$ 3,614,500		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 2,380,573		\$ 1,837,125		\$ 1,939,252	
j. Education	\$ 25,623,183		\$ 25,550,992		\$ 23,636,568	
k. Other						
Medicaid Match	\$ 0		\$ 0		\$ 9,758,117	
Title X-Fam Planning	\$ 0		\$ 0		\$ 10,420,000	
Title X (Family Plan)	\$ 10,296,956		\$ 9,085,127		\$ 0	
<b>III. SUBTOTAL</b>	\$ 42,076,539		\$ 40,337,744		\$ 46,143,937	



## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenBudgeted  
**Row Name:** Pregnant Women  
**Column Name:** Budgeted  
**Year:** 2009  
**Field Note:**  
adjust \$1 for rounding
2. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Family Planning population served was mis-classified in the past. Indicated majority as pregnant, should have been classified as "other". Corrected this year.
3. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
We are unable to identify the FFY07 initiatives and/or percentages that equal to the budget allocations indicated in the grant application and surmise that dollars were incorrectly categorized therefore resulting in the large differences in expenditures for "infants under one year only" and "children 1 to 22 years old".
4. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
We are unable to identify the FFY07 initiatives and/or percentages that equal to the budget allocations indicated in the grant application and surmise that dollars were incorrectly categorized therefore resulting in the large differences in expenditures for "infants under one year only" and "children 1 to 22 years old".
5. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
State appropriation add for School Health Program which serves school-aged children.
6. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2006  
**Field Note:**  
Family Planning population served was mis-classified in the past. Indicated majority as pregnant, should have been classified as "other". Corrected this year.  
  
Also State Infertility appropriation included here.
7. **Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
The budget for Administrative costs was constructed using using some methodology that derived percentages that we are not able to duplicate. The expenditure amount uses percentage or amounts reported by program.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: NY**

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 647,330,857	\$ 604,784,768	\$ 628,765,665	\$ 655,463,160	\$ 635,696,049	\$ 617,901,245
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 179,716,667	\$ 195,495,265	\$ 174,562,464	\$ 176,116,304	\$ 187,621,486	\$ 179,091,959
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 69,586,605	\$ 87,802,134	\$ 67,590,889	\$ 64,527,461	\$ 102,671,574	\$ 105,710,343
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 77,968,185	\$ 71,704,767	\$ 75,732,089	\$ 74,230,839	\$ 71,498,782	\$ 97,399,351
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 974,602,314	\$ 959,786,934	\$ 946,651,107	\$ 970,337,764	\$ 997,487,891	\$ 1,000,102,898

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: NY**

TYPE OF SERVICE	FY 2007		FY 2008		FY 2009	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 587,681,132	\$ 545,637,112	\$ 479,686,457	\$ 0	\$ 542,289,899	\$ 0
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 171,011,137	\$ 124,847,808	\$ 111,547,731	\$ 0	\$ 72,957,273	\$ 0
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 70,123,615	\$ 68,531,654	\$ 118,240,385	\$ 0	\$ 110,605,239	\$ 0
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 76,004,950	\$ 78,488,037	\$ 234,623,860	\$ 0	\$ 190,799,108	\$ 0
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 904,820,834	\$ 817,504,611	\$ 944,098,433	\$ 0	\$ 916,651,519	\$ 0

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

1. Section Number: Main

Field Name: EnablingExpended

Row Name: Enabling Services

Column Name: Expended

Year: 2007

Field Note:

Under expenditures in the Enabling Services Category are most likely due the inclusion of a number of initiatives that should not have been included coupled with program income and some local calculation methodologies that could not be duplicated.

2. Section Number: Main

Field Name: InfrastrBuildExpended

Row Name: Infrastructure Building Services

Column Name: Expended

Year: 2006

Field Note:

The increase in infrastructure expenditures is based on a new estimate performed by MCH program managers and captured in our MCH Program Managers Database. Upon further analysis of these data, it would appear that the increase in this allocation is due to additional dollars that were allocated for Centers for Excellence, an Oral Health Technical Assistance Center, IT expenditures, additional MCH internship opportunities, and additional residency slots.

FORM 6						
NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED						
Sect. 506(a)(2)(B)(iii)						
STATE: NY						
Total Births by Occurrence: 255,275				Reporting Year: 2007		
Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	255,275	100	34	13	13	100
Congenital Hypothyroidism	255,275	100	1,098	260	260	100
Galactosemia	255,275	100	12	5	5	100
Sickle Cell Disease	255,275	100	88	77	77	100
Other Screening (Specify)						
Cystic Fibrosis	255,275	100	1,651	40	40	100
Screening Programs for Older Children & Women (Specify Tests by name)						
(1) Use occurrent births as denominator.						
(2) Report only those from resident births.						
(3) Use number of confirmed cases as denominator.						

## FORM NOTES FOR FORM 6

See attachment to setio4FC (other Program Activities) for additional newborn screening for the time period Jan.-Dec. 2007.

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** SickCellDisease\_Confirmed  
**Row Name:** SickCellDisease  
**Column Name:** Confirmed Cases  
**Year:** 2009  
**Field Note:**

.

2. **Section Number:** Other Screening Types  
**Field Name:** Other  
**Row Name:** All Rows  
**Column Name:** All Columns  
**Year:** 2009

**Field Note:**

NYS tests 100% of newborns for a number of other conditions not listed on this form, including Argininemia, Arginonsuccinic acidemia, Biotinidase deficiency, Mitochondrial acetoacetyl-CoA thiolase deficiency, Congenital adrenal hyperplasia, Carnitine-acylcarnitine translocase deficiency, Colbalamin A,B and C,D cofactor deficiencies, Hemoglobin C disease, Citrullinemia, Carnitine palmitoyltransferase I and II deficiency, Carnitine uptake defect, 2,4-Dienoyl-CoA reductase deficiency, Glutaric Acidemia Type I and II, Homocystinuria, Hyperammonemia/ hyperornithinemia/homocitrullinemia, HIV-1 infection, Hypermethioninemia, 3-Hydroxy-3-methylglutaryl-CoA lyase deficiency, Isobutyryl-CoA dehydrogenase deficiency, Isovaleric acidemia, Long-chain 3-hydroxyacyl-CoA dehydrogenase deficiency, Malonic acidemia, Multiple acyl-CoA dehydrogenase deficiency, Medium-chain acyl-CoA dehydrogenase deficiency, 2- and 3-Methylbutyryl-CoA dehydrogenase deficiency, Multiple carboxylase deficiency, Medium-chain ketoacyl-CoA thiolase deficiency, 3-Methylglutaconic acidemia, 2-Methyl 3-hydroxybutyryl-CoA dehydrogenase deficiency, Methylmalonic acidemia, Medium/short-chain hydroxyacyl-CoA dehydrogenase deficiency, Maple syrup urine disease, Methylmalonyl-CoA mutase deficiency, prionic acidemia, Short-chain acyl-CoA dehydrogenase deficiency, Sickly cell anemia, Mitochondrial trifunctional protein deficiency, Tyrosinemia, and Very long-chain acyl-CoA dehydrogenase deficiency. All but one had at least one presumed positive, and only 5 had no confirmed cases. All confirmed cases needing treatment received treatment.

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

[Sec. 506(a)(2)(A)(i-ii)]

**STATE: NY**

**Reporting Year: 2007**

	TITLE V	PRIMARY SOURCES OF COVERAGE				
Types of Individuals Served	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	388,110	42.7				57.3
Infants < 1 year old	244,832	31.4	1.0	59.2	8.4	0.0
Children 1 to 22 years old	5,644,950	26.0	6.4	59.2	8.4	0.0
Children with Special Healthcare Needs	554,740				7.4	92.6
Others	485,170	20.7	0.0	63.3	16.0	0.0
<b>TOTAL</b>	<b>7,317,802</b>					

## FORM NOTES FOR FORM 7

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** CSHCN\_TS  
**Row Name:** Children with Special Health Care Needs  
**Column Name:** Title V Total Served  
**Year:** 2009  
**Field Note:**  
Includes children served by: School-Based Health Centers (165,000), CSHCN Program (5,566), Early Intervention Program (70,000), Newborn Screening program (almost all screened for both inborn metabolic disorders and hearing), and 12.7% (12.7% (est. of percentage of all children in NYS with SHCN) of children served by Community-Based Adolescent Pregnancy Prevention Program (55,713 out of 438,690). The number does not include 12.7% of adolescents served by family planning programs, since there may be some overlap with the CBAPP program.
2. **Section Number:** Main  
**Field Name:** AllOthers\_TS  
**Row Name:** Others  
**Column Name:** Title V Total Served  
**Year:** 2009  
**Field Note:**  
Estimate that includes 87.8% of CBAPP children (385,170), adolescents served by the family planning program (100,000).



**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: NY**

Reporting Year: 2007

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	238,004	155,643	50,477	415	21,129	0	0	10,340
Title V Served	238,004	155,643	50,477	415	21,129	0	0	10,340
Eligible for Title XIX	104,975	55,289	32,762	209	10,413	0	0	6,302
<b>INFANTS</b>								
Total Infants in State	249,207	163,790	52,212	502	21,704	0	0	10,999
Title V Served	249,207	163,790	52,212	502	21,704	0	0	10,999
Eligible for Title XIX	106,381	55,968	33,308	211	10,529	0	0	6,365

**II. UNDUPLICATED COUNT BY ETHNICITY**

				<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	179,239	57,912	853	0	0	0	0	57,912
Title V Served	179,239	57,912	853	0	0	0	0	57,912
Eligible for Title XIX	64,661	40,168	146	0	0	0	0	40,168
<b>INFANTS</b>								
Total Infants in State	188,809	59,488	910	0	0	0	0	59,488
Title V Served	188,809	59,488	910	0	0	0	0	59,488
Eligible for Title XIX	65,629	40,604	148	0	0	0	0	40,604

**FORM NOTES FOR FORM 8**

2006 data have been used as a proxy for 2007 data, which were not yet available at the time this summary was generated.

**FIELD LEVEL NOTES**

None

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: NY**

	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>	<b>FY 2006</b>	<b>FY 2005</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800) 522-5006</u>	<u>(800)522-5006</u>	<u>(800) 522-5006</u>	<u>(800) 522-5006</u>	<u>(800) 522-5006</u>
2. State MCH Toll-Free "Hotline" Name	The Growing Up Healthy Hotline	The Growing Up Healthy Hotline	The Growing Up Healthy Hotline	The Growing Up Healthy Hotline	The Growing Up Healthy Hotline
3. Name of Contact Person for State MCH "Hotline"	<u>Michael Acosta</u>	<u>Michael Acosta</u>	<u>Rudy Lewis</u>	<u>Rudy Lewis</u>	<u>Rudy Lewis</u>
4. Contact Person's Telephone Number	<u>(518) 474-1911</u>	<u>(518)474-1911</u>	<u>(518) 474-1911</u>	<u>(518) 474-1911</u>	<u>(518) 474-1911</u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>60,471</u>	<u>55,380</u>	<u>60,953</u>

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: NY**

	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>	<b>FY 2006</b>	<b>FY 2005</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
4. Contact Person's Telephone Number	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Main  
**Field Name:** calls\_2  
**Row Name:** Number of calls received On the State MCH Hotline This reporting period  
**Column Name:** FY  
**Year:** 2007  
**Field Note:**  
Updated 6-3-08

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2009**  
*[SEC. 506(A)(1)]*  
**STATE: NY**

1. State MCH Administration:  
(max 2500 characters)

The New York State Department of Health's Division of Family Health administers the Title V program in New York State. The Title V program supports activities designed to improve the health status of women, particularly those of reproductive age, infants, children and adolescents, including those with special health care needs. Funds support public health/maternal and child health services infrastructure, population-based, enabling and gap-filling personal health care services for those with limited access to high quality, continuous health care. The Division of Family Health encompasses four Bureaus (Women's Health, Dental Health, Early Intervention, and Child and Adolescent Health). The Division also provides leadership for the State Systems Development Initiative (SSDI), the American Indian Health Program, the Asthma Coordinators, MCH Graduate Assistantship Program, and the Migrant and Seasonal Framworker Health Program.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 41,629,217
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 390,311,698
5. Local MCH Funds (Line 4, Form 2)	\$ 309,987,228
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 174,723,376
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 916,651,519</b>

9. Most significant providers receiving MCH funds:

School-based health centers
Family Planning Programs
Newborn screening and genetics services
Lead poisoning prevention and education servicesGe

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	388,110
b. Infants < 1 year old	244,832
c. Children 1 to 22 years old	5,644,950
d. CSHCN	554,740
e. Others	485,170

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:  
(max 2500 characters)

Genetics services, school-based health centers, family planning, tracking and follow-up of lead poisoned children, primary care and dental services for migrant and seasonal farmworkers and their families, public health nurse home visiting. The Prenatal Care Assistance Program (PCAP/MOMS), the Community Health Worker Program, Children with Special Health Care Needs program, services to Native American women and children, care coordination, patient education, translation, transportation, and Physically handicapped children diagnosis and. evaluation

b. Population-Based Services:  
(max 2500 characters)

Newborn genetics and hearing screening, population-based health education campaigns, including prenatal outreach and education and perinatal mood disorders, child find, the Growing Up Healthy Hotline, injury prevention, immunization, Welcome to Parenthood, fluoridation services, health information and referral, nutrition and physical activities programs for children, adolescent pregnant prevention, Youth Development, migrant health outreach and education.

c. Infrastructure Building Services:  
(max 2500 characters)

Maternal mortality program, surveillance and public health information, community health assessments, vital records, hospital discharge data system (SPARCS), immunization registries, workforce development, staff development, evaluation and monitoring, contract management, perinatal regionalization, emergency preparedness, standards and guidelines development, contractor training, policy development. Education-related activities include the Preventive Medicine and Dental Public Health residency programs, the MCH Graduate Assistantship program, the Lactation Institute, Public Health Grand Rounds, monthly T2B2 Satellite broadcasts, Centers for Excellence, the Statewide Oral Health Technical Assistance Center, participation in the New York/New Jersey Public Health Training Center, and participation in national meetings and organizations.

12. The primary Title V Program contact person:

Name	Barbara L. McTague
Title	Director, Division of Family Health
Address	Room 890, Corning Tower Building, ESP
City	Albany
State	NY

13. The children with special health care needs (CSHCN) contact person:

Name	Susan Slade, MS, RN
Title	Co-Director, Medical Home Unit
Address	Room 208, Corning Tower, ESP
City	Albany
State	NY

Zip 12237-0657  
Phone (518) 474-6968  
Fax (518) 473-2015  
Email blm01@health.state.ny.us  
Web www.health.state.ny.us

Zip 12237-0618  
Phone (518) 474-2001  
Fax (518) 473-8673  
Email sj11@health.state.ny.us  
Web www.health.state.ny.us

**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None

**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: NY**

**Form Level Notes for Form 11**

None

**PERFORMANCE MEASURE # 01**

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

**Annual Objective and Performance Data**

	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Performance Objective</b>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>
<b>Annual Indicator</b>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
<b>Numerator</b>	<u>254,018</u>	<u>250,209</u>	<u>246,243</u>	<u>252,014</u>	<u>255,275</u>
<b>Denominator</b>	<u>254,018</u>	<u>250,259</u>	<u>246,243</u>	<u>252,014</u>	<u>255,275</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

**Is the Data Provisional or Final?**

Final

Final

**Annual Objective and Performance Data**

	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>
<b>Annual Performance Objective</b>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

None



**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	65	70	62	64	66
Annual Indicator	60.3	60.3	60.3	60.3	59
Numerator					
Denominator					

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	66	67	67	68	68
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

2. **Section Number:** Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

3. **Section Number:** Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The data reported in 2005 are pre-populated with the data from 2004 for this performance measure.

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	55	60	52	55	58
Annual Indicator	51.7	51.7	51.7	51.7	45.2
Numerator					
Denominator					

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	58	58	59	59	60
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Performance Measure #3

**Field Name:** PM03

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

2. **Section Number:** Performance Measure #3

**Field Name:** PM03

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

3. **Section Number:** Performance Measure #3

**Field Name:** PM03

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The data reported in 2005 are pre-populated with the data from 2004 for this performance measure.

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	60	65	70	68	70
Annual Indicator	59.1	59.1	59.1	59.1	62.1
Numerator					
Denominator					

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	72	74	74		
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

**2. Section Number:** Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**3. Section Number:** Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The data reported in 2005 are pre-populated with the data from 2004 for this performance measure.

**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	80	85	78	80	82
Annual Indicator	75.3	75.3	75.3	75.3	90.6
Numerator					
Denominator					

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	91	92	92	92	93
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

2. **Section Number:** Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

3. **Section Number:** Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The data reported in 2005 are pre-populated with the data from 2004 for this performance measure.

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	10	20	7	7	9
Annual Indicator	5.8	5.8	5.8	5.8	38.4
Numerator					
Denominator					

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	40	40	40	43	43
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

**2. Section Number:** Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**3. Section Number:** Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The data reported in 2005 are pre-populated with the data from 2004 for this performance measure.

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	79	81	85	86	87
Annual Indicator	78.8	83.3	81.6	83.5	85.8
Numerator					
Denominator					
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	88	89	90	90	90
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Performance Measure #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data from the National Immunization Survey. Numerator and Denominator data are not available. Data are for the time period 7/06-6/07.

2. **Section Number:** Performance Measure #7

**Field Name:** PM07

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data is from the National Immunization Survey. Numerator and Denominator data are not available. Data are for the time period 1/04-12/04 (the latest available).

**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	15	14	13	12	11
Annual Indicator	14.9	14.2	13.7	13.1	13.1
Numerator	5,566	5,415	5,332	5,214	5,214
Denominator	373,439	381,221	390,618	398,091	398,091

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	11	11	11	10	10
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. Section Number: Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2007

Field Note:

2006 data are being used as a proxy for 2007.

**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	50	60	40	30	35
Annual Indicator	38.2	27.0	27.0	27.0	27.0
Numerator	3,961	10,534	10,534	10,534	10,534
Denominator	10,369	39,014	39,014	39,014	39,014

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	40	40	45	45	45
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2007**Field Note:**

2002-2004 data are being used as a proxy for 2007.

**2. Section Number:** Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2006**Field Note:**

2002-2004 data are being used as a proxy for 2006.

**3. Section Number:** Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2005**Field Note:**

2002-2004 data is being used as a proxy for 2005.



**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	0.6	0.5	0.5	1.1	1
Annual Indicator	0.7	2.2	1.3	1.3	1.3
Numerator	27	85	49	50	50
Denominator	3,766,916	3,790,880	3,790,880	3,916,635	3,916,635

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	0.9	0.9	0.8	0.8	0.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Performance Measure #10

**Field Name:** PM10

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics.

2. **Section Number:** Performance Measure #10

**Field Name:** PM10

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics.

3. **Section Number:** Performance Measure #10

**Field Name:** PM10

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics.

**PERFORMANCE MEASURE # 11**

The percent of mothers who breastfeed their infants at 6 months of age.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective				40	43
Annual Indicator			37.2	50	50
Numerator					
Denominator					

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	51	52	53	54	55
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2007 data are based on the 2004 birth cohort.

Data Source: National Immunization Survey - breastfeeding supplement

**2. Section Number:** Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

2006 data are based on the 2004 birth cohort.

Data source: National Immunization Survey - breastfeeding supplement.

**3. Section Number:** Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

2004 data are being used as a proxy for 2005.

Data are from the National Immunization Survey.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	100	100	100	100	100
Annual Indicator	96.4	99.9	98.8	97.9	97.9
Numerator	227,848	240,577	242,628	242,212	242,212
Denominator	236,259	240,921	245,675	247,352	247,352

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. Section Number: Performance Measure #12

Field Name: PM12

Row Name:

Column Name:

Year: 2007

Field Note:

2006 data are being used as a proxy for 2007.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	6	5	9	8.5	8
Annual Indicator	9.4	8.6	7.7	8.4	8.4
Numerator	432,000	396,000	347,000	380,000	380,000
Denominator	4,572,000	4,604,000	4,534,000	4,547,000	4,547,000

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	8	7.5	7	6.5	6.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Performance Measure #13  
**Field Name:** PM13  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 2006 data are being used as a proxy for 2007.

**PERFORMANCE MEASURE # 14**

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective				32	31
Annual Indicator			32.1	32.0	32.0
Numerator			24,562	63,874	63,874
Denominator			76,566	199,608	199,608

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	30	29	29	28	28
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**1. **Section Number:** Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 data are being used as a proxy for 2007.

2. **Section Number:** Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2005**Field Note:**

Numerator and demonminator data is not available.

**PERFORMANCE MEASURE # 15**

Percentage of women who smoke in the last three months of pregnancy.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective				15	14
Annual Indicator			15	12.2	12.2
Numerator					
Denominator					

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	14	13	12	11	11
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 NYS PRAMS data, exclusive of NYC, are being used as a proxy for 2007.

**2. Section Number:** Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data are from the NYS Prams Survey and are for New York State excluding New York City. The latest data available for this measure is 2003.

**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	4.6	4.4	4.2	4.1	4.1
Annual Indicator	4.5	5.2	3.9	4.0	4.0
Numerator	57	68	52	51	51
Denominator	1,279,454	1,297,818	1,318,372	1,289,480	1,289,480

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	4	4	3.9	3.7	3.7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. Section Number: Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2007

Field Note:

2006 data are being used as a proxy for 2007.

**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	85	87	90	91	92
Annual Indicator	86.2	87.2	87.1	88.6	88.6
Numerator	3,436	3,453	3,281	3,345	3,345
Denominator	3,986	3,962	3,765	3,774	3,774

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	92	94	94	95	95
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**1. **Section Number:** Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 data are being used as a proxy for 2007.

2. **Section Number:** Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2006**Field Note:**

2006 data have been updated and finalized.



**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	80	82.5	85	77	78
Annual Indicator	74.7	74.9	75.4	74.6	74.6
Numerator	180,870	175,151	174,737	174,078	174,078
Denominator	242,030	233,802	231,661	233,441	233,441

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	79	80	81	82	82
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. Section Number: Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2007

Field Note:

2006 data are being used as a proxy for 2007.

**STATE PERFORMANCE MEASURE # 1**

Percent of Live Births Resulting from Unintended Pregnancies

Annual Objective and Performance Data					
	2003	2004	2005	2006	2007
Annual Performance Objective				32.8	32.7
Annual Indicator	36.3	36.3	35.8	33.4	33.4
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2008	2009	2010	2011	2012
Annual Performance Objective	31	31	30.5	30	29.5
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** State Performance Measure #1

**Field Name:** SM1**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 data are being used as a proxy for 2007. Numerator and denominator data are not available. Data are from the NYS PRAMS survey for areas in NYS outside of NYC.

2. **Section Number:** State Performance Measure #1

**Field Name:** SM1**Row Name:****Column Name:****Year:** 2005**Field Note:**

Numerator and denominator data are not available. Data are from the NYS Prams Survey for areas in New York Sate outside of NYC.

**STATE PERFORMANCE MEASURE # 2**

Hospitalization Rate for Asthma in Children 1 to Age 14

Annual Objective and Performance Data					
	2003	2004	2005	2006	2007
Annual Performance Objective				245	235
Annual Indicator	401.5	384.0	335.9	319.2	319.2
Numerator	14,119	13,588	11,729	11,716	11,716
Denominator	3,516,854	3,538,603	3,492,321	3,670,552	3,670,552
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2008	2009	2010	2011	2012
Annual Performance Objective	235	235	230	230	230
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** State Performance Measure #2

**Field Name:** SM2

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 are being used as a proxy for 2007.

**STATE PERFORMANCE MEASURE # 4**

Teenage Pregnancy Rate for Girls Ages 15-17

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				35	34
Annual Indicator	38.2	37.5	36.5	36.3	36.3
Numerator	14,276	14,283	14,256	14,444	14,444
Denominator	373,439	381,221	390,618	398,091	398,091
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	34	33	33	32	32
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** State Performance Measure #4

**Field Name:** SM4

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

**STATE PERFORMANCE MEASURE # 6**

Percent of infants who are put down on their backs to sleep.

Annual Objective and Performance Data					
	2003	2004	2005	2006	2007
Annual Performance Objective				82	84
Annual Indicator	69	69.5	67.2	71.9	71.9
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2008	2009	2010	2011	2012
Annual Performance Objective	84	85	85	85	86
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** State Performance Measure #6

**Field Name:** SM6**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 data are being used as a proxy for 2007. Data are from the NYS PRAMS Survey which includes women residing in NYS outside of NYC.

2. **Section Number:** State Performance Measure #6

**Field Name:** SM6**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data are from NYS PRAMS Survey which includes women residing in NYS outside of NYC.

3. **Section Number:** State Performance Measure #6

**Field Name:** SM6**Row Name:****Column Name:****Year:** 2005**Field Note:**

Numerator and denominator data are not available (survey data), Data are from the PRAMS Survey which includes women from areas in NYS outside of NYC.

**STATE PERFORMANCE MEASURE # 7**

Hospitalizations for Self-Inflicted Injuries for 15-19 Year Olds

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				0.1	0.1
Annual Indicator	0.1	0.1	0.1	0.1	0.1
Numerator	1,257	1,421	1,291	1,320	1,320
Denominator	1,279,454	1,297,818	1,318,372	1,289,480	1,289,480
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	0.1	0.1	0.1	0.1	0.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**1. **Section Number:** State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 data are being used as a proxy for 2007.

**STATE PERFORMANCE MEASURE # 8**

Percent of High School Students who had five or more drinks of alcohol in a row at least once in the Last Month

Annual Objective and Performance Data					
	2003	2004	2005	2006	2007
Annual Performance Objective				19	18
Annual Indicator	25.3	25.3	23.9	23.9	24.9
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2008	2009	2010	2011	2012
Annual Performance Objective	18	18	18	18	18
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator and Denominator data are not available (2007 YRBS survey data)

**2. Section Number:** State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2006**Field Note:**

2006 data are from the 2005 YRBS (biannual) survey. There are no numerator or denominator data available from this survey.

**3. Section Number:** State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data are from the Youth Risk Behavior Survey. Numerator and denominator data are not available (survey data).

**STATE PERFORMANCE MEASURE # 9**

Percent of High School Students Who Smoked Cigarettes in the Last Month

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				5	5
Annual Indicator	20.2	20.2	16.2	16.2	13.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	5	5	5	5	4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** State Performance Measure #9

**Field Name:** SM9**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator and Denominator data not available (2007 YRBS survey data).

2. **Section Number:** State Performance Measure #9

**Field Name:** SM9**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data are from the Youth Risk Behavior Survey. Numerator and denominator data are not available (survey data). 2005 data are being used as a proxy for 2006.

3. **Section Number:** State Performance Measure #9

**Field Name:** SM9**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data are from the 2005 YRBS. Numerator and denominator data are not available (survey data).



**STATE PERFORMANCE MEASURE # 10**

Percent of children in the birth year cohort who were screened for high blood lead before the age of two.

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				87	87
Annual Indicator	68	63	63	69.5	69.5
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	80	81	82	83	83
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data are from the NYS Lead Tracking System, based on the 2004 birth cohort ,with testing through 2007.

**2. Section Number:** State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data are based on the 2004 birth cohort with testing through 2007.

**3. Section Number:** State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data are based on the 2002 birth cohort with testing through 2005..

**STATE PERFORMANCE MEASURE # 11**

Percent of High School Students who watched 3 or more hours of TV on an average school day.

<u>Annual Objective and Performance Data</u>					
	2003	2004	2005	2006	2007
Annual Performance Objective				40	38
Annual Indicator	43.6	43.6	41.9	41.9	35.3
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2008	2009	2010	2011	2012
Annual Performance Objective	34	33	32	31	30
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator and Denominator data are not available (2007 YRBS survey data)

**2. Section Number:** State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2006**Field Note:**

2005 data are being used as a proxy for 2006. Numerator and denominator data are not available (survey data).

**3. Section Number:** State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data are based on the 2005 YRBS. Numerator and Denominator are not available (survey data).

**STATE PERFORMANCE MEASURE # 12**

Percent of Women that felt down, depressed or hopeless always or often after their baby was born.

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				11.5	11.4
Annual Indicator		10.4	9.9	8.3	8.3
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	8	8	7.5	7.5	7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** State Performance Measure #12

**Field Name:** SM12**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 data are being used as a proxy for 2007. Data are from the NYS PRAMS survey which includes women residing in NYS outside of NYC.

2. **Section Number:** State Performance Measure #12

**Field Name:** SM12**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data are from the NYS PRAMS survey which includes women residing in NYS outside of NYC.

3. **Section Number:** State Performance Measure #12

**Field Name:** SM12**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data are from the NYS PRAMS survey which includes women residing in areas in NYS outside of NYC.

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]  
**STATE: NY**

**Form Level Notes for Form 12**

None

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	5.9	5.8	5.7	5.6	5.5
Annual Indicator	6.0	6.0	5.8	5.6	5.6
Numerator	1,518	1,503	1,414	1,391	1,391
Denominator	253,001	248,876	245,378	249,207	249,207

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	5.5	5.5	5.4	5.3	5.2
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 vital records data are being used as a proxy for 2007 statewide data. Infant deaths for a given year are used as numerator data, and the births in that year are used as the denominator number. The resulting rate may be slightly different than a rate derived from matched birth-death files.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	1.6	1.5	1.4	1.4	1.3
Annual Indicator	2.4	2.2	1.9	1.9	1.9
Numerator	10.9	10.7	9.2	9	9
Denominator	4.6	4.9	4.9	4.7	4.7

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	1.3	1.3	1.3	1.2	1.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 vital records data are being used as a proxy for 2007 statewide data. Infant deaths for a given year are used as numerator data, and births for the same year as denominator data. The resulting rate may differ somewhat from a rate based on matched birth-death files.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	4.1	4	3.9	3.9	3.8
Annual Indicator	4.2	4.3	4.0	3.8	3.8
Numerator	1,060	1,058	983	936	936
Denominator	253,001	248,876	245,378	249,207	249,207

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	3.8	3.7	3.7	3.6	3.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**1. **Section Number:** Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 data are being used as a proxy for 2007. Vital statistics data are used to determine the rate: infant s who died within 28 days of birth in the target year constitute the numerator, and births for that same year are used as the denominator. The rate may vary somewhat from a rate derived from matched birth-death files.

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	1.4	1.3	1.1	1.1	1
Annual Indicator	1.8	1.8	1.8	1.8	1.8
Numerator	458	445	431	456	456
Denominator	253,001	248,876	245,378	249,207	249,207

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	1	1	1	1	1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**1. **Section Number:** Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 statewide vital records data are being used as a proxy for 2007. Postneonatal mortality rates are determined using infant deaths from 28d-1y in a given year, divided by infant births from the same year. This rate may vary marginally from a rate calculated using matched birth-death certificates.

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	11.8	11.6	11.5	5.9	5.7
Annual Indicator	6.5	7.2	7.3	5.6	5.6
Numerator	1,654	1,793	1,798	1,411	1,411
Denominator	253,741	250,019	246,397	249,862	249,862

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	5.5	5.3	5.2	5.2	5.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Outcome Measure 5

**Field Name:** OM05

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 statewide vital statistics data are being used as a proxy for 2007 data, not yet available. The numerator is derived from the number of infant deaths in the perinatal period plus fetal deaths, as reported on death and fetal death certificates for the year. The denominator is all births for the same year. This gives a rate that may vary somewhat from a rate calculated using matched birth-death files plus fetal deaths.



**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

**Annual Objective and Performance Data**

	2003	2004	2005	2006	2007
Annual Performance Objective	13	11.5	10	10	9.5
Annual Indicator	16.2	15.7	15.6	13.0	13.0
Numerator	571	557	545	479	479
Denominator	3,516,854	3,536,587	3,502,575	3,670,552	3,670,552

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2008	2009	2010	2011	2012
Annual Performance Objective	9.5	9.5	9.4	9.4	9.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 2006 data are being used as a proxy for 2007.

**STATE OUTCOME MEASURE # 1**

Maternal Mortality Rate per 100,000 Live Births

	<u>Annual Objective and Performance Data</u>				
	2003	2004	2005	2006	2007
Annual Performance Objective				20	19.5
Annual Indicator	20.9	20.5	14.7	19.3	19.3
Numerator	53	51	36	48	48
Denominator	253,001	248,876	245,378	249,207	249,207
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2008	2009	2010	2011	2012
Annual Performance Objective	19	18.5	18	17.5	17
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** State Outcome Measure 1

**Field Name:** SO1

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 statewide vital records data are being used as a proxy for 2007. The variability of this rate can be substantial on an annual basis, and depends on a number of factors, primary among which is the intensity with which case ascertainment is pursued. The Safe Motherhood/ Maternal Mortality initiative being implemented in NYS by the American College of Obstetricians and Gynecologists, in collaboration with DOH, has improvement in case ascertainment as one of its major foci. We should therefore expect the rate to increase somewhat in response to this effort, while the impact of educational initiatives designed to reduce maternal mortality is expected to lag behind ascertainment in terms of impact on the rate.

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: NY**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

3

**Total Score:** 18

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

## FORM NOTES FOR FORM 13

The survey was sent to 17 Family Champions and 3 Family Members from the ES-CHIP collaborative as well as parents of the YAC, plus several others. Please note that the survey was conducted in the first half of 2007, and the results were presented initially in the 2008 MCHBG application, and are therefore unchanged, with the exception of an additional youth-oriented survey conducted and reported on in this section.

NYS created a Youth Involvement Survey for the first time this year. The Youth Advisory Committee consists of 19 youth advisors, or whom 8 were requested to complete the survey. All survey items were identical, except for the substitution of "Youth and young adult members" for the words "family members." The results were very positive. Each item was scored highly, and all scores rounded to "3." Although not a required MCHBG survey, the results are of interest, and accomplishments are presented in the notes following each survey item for family members.

### FIELD LEVEL NOTES

#### 1. Section Number: Main

**Field Name:** Question1

**Row Name:** #1. Family members participate on advisory committee or task forces...

**Column Name:**

**Year:** 2009

**Field Note:**

- NYSDOH sponsored focus groups that included families in the development of a Children with Special Health Care Needs (CSHCN) Resource Manual and Portable Health Summary Tool. Parents, grandparents, and youth representatives were paid stipends, and received travel, meal and child care reimbursement in order to facilitate their attendance.

- Families have been recruited and supported to serve on NYSDOH workgroups, committees and learning collaboratives. Travel, meals and childcare costs are paid ensuring the families bear no expense to participate.

- A parent of a child with special health care needs serves on the Emergency Medical Services Advisory Council to ensure that family interests are represented.

- Parents and youth have been sponsored to attend the Annual Meeting of the Association of Maternal and Child Health Programs in Washington, DC. Parents are mentored and prepared by the Family Specialist for their roles in this meeting. Travel, meals and childcare costs are paid ensuring the families bear no expense to participate.

- A group of family representatives participate in quarterly conference calls. Family representatives were recruited initially through a "Champions for Progress" grant that assisted the Department in increasing the cadre of family leaders in this State. Families receive information about issues they have raised, as well as updates about Children with Special Health Care Needs Program activities and NYSDOH initiatives.

Youth-specific accomplishments in 2007-08:

- NYSDOH sponsored focus groups that included youth in the development of a Children with Special Health Care Needs (CSHCN) Resource Manual and Portable Health Summary Tool. Youth representatives were paid stipends, and received travel, meal and attendant care reimbursement in order to facilitate their attendance.

- Youth and young adults have been recruited and supported to participate in NYSDOH Youth Advisory Committee meetings for two years. Travel, meals and attendant care costs are paid ensuring the youth/young adults bear no expense to participate.

- A young adult was sponsored to attend and presented at the Annual Meeting of the Association of Maternal and Child Health Programs in Washington, DC, in 2003. The young adult was mentored and prepared by the Family Specialist for their role in this meeting. Travel, meals and attendant care costs are paid ensuring the youth and young adults bear no expense to participate.

- A young adult was nominated to a national committee on youth leadership.

#### 2. Section Number: Main

**Field Name:** Question2

**Row Name:** #2. Financial support (...) is offered for parent activities or parent groups.

**Column Name:**

**Year:** 2009

**Field Note:**

Accomplishments related to Survey Item #2

- Parents, grandparents, and youth representatives were paid stipends, and received travel, meal and child care reimbursement in order to support their attendance at NYSDOH sponsored focus groups which worked on the development of a Children with Special Health Care Needs Resource Manual and Portable Health Summary Tool.

- Parents and youth have been sponsored to attend the Annual Meeting of the Association of Maternal and Child Health Programs in Washington, DC. Travel, meals and childcare costs are paid by the Block Grant ensuring the families bear no expense to participate. The NYSDOH Family Specialist assists parents with making financial arrangements.

- The Department utilizes families' input to assist with Maternal and Child Health work. NYSDOH sponsored focus groups involving parents, grandparents and youth in the development of a Resource Manual and Portable Health Summary tool. Per NYSDOH policy, stipends and child care expenses are paid by NYSDOH to minimize out-of-pocket expenses for families and youth who participate.

Youth-specific accomplishments in 2007-08:

- Per NYSDOH policy, youth and young adult representatives were paid stipends, and received travel, meal and attendant care reimbursement in order to support their attendance at NYSDOH sponsored focus groups which worked on the development of a Children with Special Health Care Needs Resource Manual and Portable Health Summary Tool.

- A young adult was sponsored to attend the Annual Meeting of the Association of Maternal and Child Health Programs in Washington, DC. Travel, meals and attendant care costs are paid by the Block Grant ensuring the families bear no expense to participate. The NYSDOH Family Specialist assists youth and young adults with making travel arrangements.

#### 3. Section Number: Main

**Field Name:** Question3

**Row Name:** #3. Family members are involved in the Children with Special Health Care Needs...

**Column Name:**

**Year:** 2009

**Field Note:**

Accomplishments related to Survey Item #3:

- Parents have been invited to public hearings held for the New York State Maternal and Child Health Block Grant Report and Application and have testified on access to health care.

- Families are invited and supported to participate in Focus Groups advising the New York State Department of Health on its annual Block Grant Report and Application. Travel, meals and childcare costs are paid by Block Grant ensuring the families bear no expense to participate.

- Parents of CSHCN who are NYSDOH employees participate in all aspects of grant application preparation (needs assessment, performance review, program planning, etc.).

Youth-specific accomplishments in 2007-08:

- Youth and young adults provide input regarding resources and tools they need for transitioning to adult health care, living and earning. The youth/young adult perspective is part of the needs assessment of the Maternal and Child Health Block Grant application.

- The Family Specialist mentors new parent representatives and arranges for training on Block Grant related topics.

**4. Section Number:** Main

**Field Name:** Question4

**Row Name:** #4. Family members are involved in service training of CSHCN staff and providers.

**Column Name:**

**Year:** 2009

**Field Note:**

Accomplishments related to Survey Item #4:

- The Family Specialist and other parents provide in-service training for Children with Special Health Care Needs (CSHCN) staff, community providers and organizations, and other state agencies. Parents are actively involved as trainers as part of Medical Home community- based and state teams.

- Parents were invited to participate as workgroup members for a new initiative to build Early Childhood Comprehensive Systems. Members of the Early Childhood Comprehensive Systems workgroups trained other workgroup members on family issues and concerns. These issues were emphasized in the workgroup report. Parents also provided input into training and recruitment needs of service providers.

- The Family Specialist provides ongoing training about CSHCN and Medical Home activities to other state agencies.

- The Family Specialist and other family program staff provide technical assistance to local CSHCN Programs on family issues.

Youth-specific accomplishments in 2007-08:

- Youth and young adults provide presentations about their transition web page to other youth, Children with Special Health Care Needs (CSHCN) staff, and other state staff. Youth/young adults are actively involved in advisory roles as partners with the Healthy Transitions Network and NYSDOH.

**5. Section Number:** Main

**Field Name:** Question5

**Row Name:** #5. Family members hired as paid staff or consultants to the State CSHCN program...

**Column Name:**

**Year:** 2009

**Field Note:**

Accomplishments related to Survey Item #5:

- A parent of a child with special health care needs works as the Family Specialist in the Children with Special Health Care Needs Program. The Program Director is also a parent of a child with special health care needs.

- CSHCN Program staff consults parent employees and other parents in designing new programs and initiatives, such as the Medical Home model and Early Childhood Comprehensive Systems.

Youth-specific accomplishments in 2007-08:

- CSHCN Program staff consults youth and young adults in designing new program initiatives and tools (i.e. web page information and the Portable Health Care Summary). Youth and young adults are paid stipends.

**6. Section Number:** Main

**Field Name:** Question6

**Row Name:** #6. Family members of diverse cultures are involved in all of the above activities

**Column Name:**

**Year:** 2009

**Field Note:**

Accomplishments related to Survey Item #6:

- The process to engage family representatives in all NYSDOH activities includes consideration of cultural and geographic diversity and selection of family members who represent this diversity.

- Several stakeholders, who participated as advisors to the Champions for Progress training opportunity, represent diverse community-based organizations and the NYSDOH Office of Minority Health. These stakeholders ensured diversity among our selected family leaders.

- Parent diversity is achieved through culturally diverse focus groups. This group provides NYSDOH with information on gaps in service delivery and provides advice on the Block Grant application process.

- Culturally diverse families have testified before the Block Grant advisory council.

Youth-specific accomplishments in 2007-08:

- The diversity of the Youth Advisory Committee (YAC) was achieved through a selection process that included consideration of cultural and geographic diversity of the applicants.

- Several stakeholders, who participated as advisors to the YAC recruitment efforts, represented diverse community-based organizations (Synergia, Asian-American CSHCN Outreach Program, Families Together of NYS, and Parent to Parent of NYS) and the NYSDOH Office of Minority Health. These stakeholders ensured diversity among our selected youth leaders.

- Youth and young adult involvement is achieved through culturally diverse focus groups. These groups provide NYSDOH with information on gaps in service delivery and advice on the Maternal and Child Health Block Grant application.

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

[Sec. 505(a)(5)]

**STATE: NY FY: 2009**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women," and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. To improve access to high-quality health services for all New Yorkers, with a special emphasis on prenatal care and primary and preventative care which includes attention to mental health issues and which serves those with special health care needs;
2. To improve oral health, particularly for pregnant women, mothers and children, and among those with low income;
3. To prevent and reduce the incidence of overweight for infants, children and adolescents;
4. To eliminate racial, ethnic and geographic disparities in health outcomes, especially with regard to low birth weight and infant mortality;
5. To improve diagnosis and appropriate treatment of asthma in the maternal and child health population;
6. To reduce or eliminate tobacco, alcohol and substance use among children and pregnant women;
7. To reduce unintended and adolescent pregnancies;
8. To ensure the availability of comprehensive genetics services statewide, including follow-up on positive newborn screening tests, specialty services, and genetics counseling for affected families;
9. To reduce the rate of violence across all age groups, including inflicted and self-inflicted injuries and suicides in 15- to 19-year-olds;
10. To improve parent and consumer participation in the Children with Special Health Care Needs Program, as evidenced by parent scores.

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: NY

APPLICATION YEAR: 2009

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	TA from a large state which has implemented fluoride varnish in pediatric settings	A fluorid varnish pilot program is under consideration	TBA
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>                    </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			



	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

**FORM NOTES FOR FORM 15**

None

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: NY**

SP # 1

**PERFORMANCE MEASURE:**

Percent of Live Births Resulting from Unintended Pregnancies

**STATUS:**

Active

**GOAL**

To decrease the number of unintended pregnancies

**DEFINITION**

Births to women that were unintended.

**Numerator:**

Number of women surveyed that reported they wanted to be pregnant later or not at all.

**Denominator:**

Number of women responding to the survey times 100

**Units:** 100   **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The NYS PRAMS Survey is the source for these data. One limitation is that the survey is only available for NYS excluding NYC.

**SIGNIFICANCE**

Unintended pregnancy is a problem among women in all age groups. In 1994 48% of American females aged 15-44 years had at least one unintended pregnancy in their lifetime and nearly 1/3 had one or more abortions.

SP # 2

**PERFORMANCE MEASURE:**

Hospitalization Rate for Asthma in Children 1 to Age 14

**STATUS:**

Active

**GOAL**

To reduce asthma morbidity among children.

**DEFINITION**

**Numerator:**

Number of hospitalizations for asthma among children age 1 to 14.

**Denominator:**

Number of children ages 1 to 14 times 100,000.

**Units:** 100000 **Text:** Per 100,000 children ages 1 to 14.

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The NYS SPARCS Data System is the source for the hospitalization data. The NYSDOH Bureau of Biometrics provides population estimates. .

**SIGNIFICANCE**

Increased asthma prevalence among children and the associated morbidity due to exacerbations and persistent symptoms present a huge burden to affected individuals and their families. In the US, over 10 million school days are lost annually by children with asthma. Consequently lost productivity of their parents was almost \$1M. Patients with inadequately controlled severe asthma have high expenditures in health care costs, especially in terms of hospitalizations. The social and economic burdens of asthma can be alleviated through appropriate asthma prevention and management strategies.

SP # 4

**PERFORMANCE MEASURE:**

Teenage Pregnancy Rate for Girls Ages 15-17

**STATUS:**

Active

**GOAL**

To lower the pregnancy rate among teenagers.

**DEFINITION**

**Numerator:**

Number of pregnancies (including abortions, spontaneous fetal deaths, and births) to females aged 15-17 years old.

**Denominator:**

Number of females aged 15-17 years of age times 1000.

**Units:** 1000 **Text:** Rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Vital Records are the source for data on mothers' age and pregnancies. Population numbers are estimated by the Bureau of Biometrics, NYS Health Department.

**SIGNIFICANCE**

Adolescent sexual activity can have life-changing or life-threatening consequences; unintended pregnancy and infection with sexually transmitted diseases or HIV. Teen parenting is associated with non-completion of high school and the initiation of a cycle of poverty. Adolescent pregnancy reduces employment opportunities leading to increased poverty, and is associated with poorer health outcomes, less likelihood to marry, and increased dependence on public assistance.

SP # 6

**PERFORMANCE MEASURE:**

Percent of infants who are put down on their backs to sleep.

**STATUS:**

Active

**GOAL**

To increase the number of infants that are placed on their backs to sleep.

**DEFINITION**

To increase the number of infants that are placed on their backs to sleep.

**Numerator:**

Number of mothers that reported they placed their babies on there back to sleep.

**Denominator:**

Number of moms responding to the survey times 100.

**Units:** 100 **Text:** 1

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The PRAMS survey is the source for these data. One limitation is that the survey is only available for NYS excluding NYC.

**SIGNIFICANCE**

Much research has shown that infants who are placed on their backs for sleeping are at reduced risk for Sudden Infant Death Syndrome (SIDS).

SP # 7

**PERFORMANCE MEASURE:**

Hospitalizations for Self-Inflicted Injuries for 15-19 Year Olds

**STATUS:**

Active

**GOAL**

To reduce self-inflicted, preventable morbidity and mortality.

**DEFINITION**

hospitalizations

**Numerator:**

Number of hospitalizations attributed to self-inflicted injuries among youth 15-19 years of age.

**Denominator:**

Number of youth 15-19 years of age times 100,000.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The New York State SPARCS Data System is the source for the hospitalization data. The Bureau of Biometrics, NYSDOH, provides population estimates.

**SIGNIFICANCE**

Enhancing the mental health status of communities is, by itself, an important goal. Its significance is magnified by the fact that mental and physical health are often inexorably entwined. Personal characteristics or experiences such as low self-esteem, concerns about social acceptance, the absence of strong family structure and support, early exposure to violence and abuse, compulsive behavior, and fatalism are often associated with a wide range of risk behaviors and adverse health outcomes. Self-inflicted injury is one of the extreme manifestations of poor emotional health. Among adolescents and young adults, self-inflicted injuries are five times more likely to occur as compared to their older counterparts. A 1993 study of high school students in the state outside of NYC revealed that approximately 10% of those surveyed actually attempted to kill themselves. 25% of them needed medical attention as a result of their attempt.

SP # 8

**PERFORMANCE MEASURE:**

Percent of High School Students who had five or more drinks of alcohol in a row at least once in the Last Month

**STATUS:**

Active

**GOAL**

To reduce alcohol use among adolescents.

**DEFINITION**

Students who had five or more drinks of alcohol in a row, that is, within a couple of hours, on one or more of the past 30 days.

**Numerator:**

The number of high school students that reported they drank five or more drinks of alcohol in a row at least once in the last month.

**Denominator:**

The number of high school students in the survey times 100.

**Units:** 100   **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The YRBS is the source for these data.

**SIGNIFICANCE**

Alcohol is the most commonly used drug in NYS with approximately one million adult and 100,000 youth drinkers in the state. Alcohol use is also associated with high rates of injury and contributes to lack of inhibition and irresponsible sexual activity, which in turn may contribute to higher rates of unintended pregnancy, sexually transmitted diseases and HIV transmission.



SP # 9

**PERFORMANCE MEASURE:**

Percent of High School Students Who Smoked Cigarettes in the Last Month

**STATUS:**

Active

**GOAL**

To reduce smoking among adolescents.

**DEFINITION**

The rate of current smoking among high school students.

**Numerator:**

The number of high school students that reported smoking at least one cigarette during the last month.

**Denominator:**

The number of students in the survey times 100.

**Units:** 100    **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

The New York State Youth Tobacco Survey is the source for these data.

**SIGNIFICANCE**

Tobacco is an addictive substance. Tobacco causes more disease and death in NYS than any other pathogen. In 1993, 31,600 New Yorkers died of tobacco-associated conditions, accounting for 19% of all deaths. The direct medical costs related to smoking in NYS is believed to be over \$3 billion annually. Tobacco causes 30% of all cancer deaths, 82% of all deaths due to pulmonary disease, and 21% of deaths due to chronic cardiac disease. More than 1,500 fire deaths and 4,600 injuries in the US are attributable to cigarettes. In NYS in 1992 alone, cigarettes caused 33% of fatal fires, taking 733 lives. NYS surveys indicate teen smoking, after falling steadily for a number of years, is on the rise in NYS. Most (89%) adult smokers initiated their habit while young, under the age of 18. 71% of adult smokers reported that they began smoking daily before age 18.

SP # 10

**PERFORMANCE MEASURE:**

Percent of children in the birth year cohort who were screened for high blood lead before the age of two.

**STATUS:**

Active

**GOAL**

To identify all children that have been exposed to high levels of lead.

**DEFINITION**

**Numerator:**

Number of children in the birth year cohort who have been screened at least once for high blood lead levels before the age of two.

**Denominator:**

Number of children times 100.

**Units:** 100 **Text:** Per 100 children in th birth cohort.

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

NYS Heavymetals and Childhood Lead Registry, the data base for the NYS Childhood Lead Poisoning Prevention Program, is the source for these data. The NYSDOH Bureau of Biometrics provides population estimates.

**SIGNIFICANCE**

NYS is committed to screening for lead in children one and two years of age in order to identify all children with high lead levels. High lead levels are associated with learning disabilities and severe physical consequences, including death.

SP # <u>11</u>	
PERFORMANCE MEASURE:	Percent of High School Students who watched 3 or more hours of TV on an average school day.
STATUS:	Active
GOAL	To decrease the amount of time high school students watch TV.
DEFINITION	<p>Number of high school students who indicate they watch 3 or more hours of TV.</p> <p><b>Numerator:</b> Number of high school students who indicate they watch 3 or more hours of TV.</p> <p><b>Denominator:</b> Number of high school students</p> <p><b>Units:</b> 100    <b>Text:</b> Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	22-11 Increase the proportion of children and adolescents who view television 2 or fewer hours per d
DATA SOURCES AND DATA ISSUES	Youth Risk Behavior Survey.
SIGNIFICANCE	Children who watch more than 2 hours per day of television are at an increase risk for obesity in both childhood and into adulthood.

SP # <u>12</u>	
PERFORMANCE MEASURE:	Percent of Women that felt down, depressed or hopeless always or often after their baby was born.
STATUS:	Active
GOAL	To reduce symptoms of depression in postpartum women.
DEFINITION	<p>x</p> <p><b>Numerator:</b> Number of women participating in the PRAMS survey that always or often felt down, depressed or hopeless after their baby was born.</p> <p><b>Denominator:</b> Women responding to the PRAMs survey.</p> <p><b>Units:</b> 100   <b>Text:</b> Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	
DATA SOURCES AND DATA ISSUES	Pregnancy Risk Assessment Monitoring System
SIGNIFICANCE	Postpartum women are at an increased risk for depression but their symptoms can be controlled through treatment.

SO # 1

**OUTCOME MEASURE:**

Maternal Mortality Rate per 100,000 Live Births

**STATUS:**

Active

**GOAL**

To reduce the number of maternal deaths

**DEFINITION**

Deaths from causes related to pregnancy

**Numerator:**

Number of deaths occurring to women from causes related to pregnancy (ICD 9: 630 through 676)

**Denominator:**

Number of Live Births

**Units:** 100000 **Text:** Rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

Reduce the maternal mortality rate to no more than 3.3 per 100,000 live births

**DATA SOURCES AND DATA ISSUES**

Source: Vital Records Issues: Maternal death as cause of death are under reported. More aggressive case ascertainment results in what appear to be higher rates.

**SIGNIFICANCE**

Due to general improvement in social and economic conditions and medical practices, maternal deaths have become more rare and are thought to be mostly preventable.

**FORM NOTES FOR FORM 16**

None

**FIELD LEVEL NOTES**

None

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: NY**

**Form Level Notes for Form 17**

None

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	72.7	67.3	57.9	59.9	59.9
Numerator	8,833	8,381	7,236	7,409	7,409
Denominator	1,215,052	1,246,045	1,249,101	1,236,719	1,236,719

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

2. **Section Number:** Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>74.7</u>	<u>76.5</u>	<u>76.9</u>	<u>72.7</u>	<u>72.7</u>
<b>Numerator</b>	<u>103,303</u>	<u>110,535</u>	<u>111,874</u>	<u>108,995</u>	<u>108,995</u>
<b>Denominator</b>	<u>138,216</u>	<u>144,460</u>	<u>145,432</u>	<u>149,958</u>	<u>149,958</u>

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer  
than 5 and therefore a 3-year moving average cannot be  
applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

**Is the Data Provisional or Final?**

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.



**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	79	79	84	84	84
<b>Numerator</b>					
<b>Denominator</b>					

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer

than 5 and therefore a 3-year moving average cannot be

applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

Data are for the percent of children aged 15 months who recieved 5+ well child visits

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>63.1</u>	<u>66.4</u>	<u>66.5</u>	<u>65.9</u>	<u>65.9</u>
<b>Numerator</b>	<u>137,129</u>	<u>132,863</u>	<u>130,854</u>	<u>131,416</u>	<u>131,416</u>
<b>Denominator</b>	<u>217,201</u>	<u>200,115</u>	<u>196,825</u>	<u>199,342</u>	<u>199,342</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

**HEALTH SYSTEMS CAPACITY MEASURE # 07A**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	2003	2004	<b>Annual Indicator Data</b>		2007
	2005	2006			
<b>Annual Indicator</b>	91.0	93.4	94.6	94.4	94.4
<b>Numerator</b>	1,834,078	1,974,655	1,966,625	1,909,170	1,909,170
<b>Denominator</b>	2,015,608	2,113,319	2,079,460	2,021,928	2,021,928

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer  
than 5 and therefore a 3-year moving average cannot be  
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #07A

**Field Name:** HSC07A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007. The denominator represents all children currently enrolled in Medicaid.

**HEALTH SYSTEMS CAPACITY MEASURE # 07B**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>35.2</u>	<u>36.3</u>	<u>38.9</u>	<u>44.3</u>	<u>44.3</u>
<b>Numerator</b>	<u>134,265</u>	<u>140,454</u>	<u>144,365</u>	<u>159,486</u>	<u>159,486</u>
<b>Denominator</b>	<u>381,935</u>	<u>386,892</u>	<u>370,657</u>	<u>360,268</u>	<u>360,268</u>

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

**Is the Data Provisional or Final?**

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007. The denominator represents all children age 6-9 enrolled in Medicaid in 2007.

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>	<u>100.0</u>
<b>Numerator</b>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
<b>Denominator</b>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

All SSI beneficiaries receive Medicaid which is a more generous package than that available under the Physically Handicapped Children's Program.

2. **Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

All SSI beneficiaries receive Medicaid which is a more generous package than that available under the Physically Handicapped Children's Program.

3. **Section Number:** Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

All SSI beneficiaries receive Medicaid, which is a more generous package than that available under the Physically Handicapped Children's program.

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #05**  
**(MEDICAID AND NON-MEDICAID COMPARISON)**  
**STATE: NY**

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (&lt; 2,500 grams)</i>	2006	Payment source from birth certificate	<u>8.6</u>	<u>8.2</u>	<u>8.3</u>
b) <i>Infant deaths per 1,000 live births</i>	2006	Payment source from birth certificate	<u>6.2</u>	<u>4.4</u>	<u>5.6</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2006	Payment source from birth certificate	<u>62.9</u>	<u>83.7</u>	<u>74.6</u>
d) <i>Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2006	Payment source from birth certificate	<u>53.9</u>	<u>73.8</u>	<u>65.9</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)**  
**STATE: NY**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL MEDICAID</b> (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2007	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>18</u> ) (Age range <u>    </u> to <u>    </u> )	2007	<u>133</u> <u>100</u> <u>    </u>
c) <i>Pregnant Women</i>	2007	<u>200</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)**  
**STATE: NY**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL SCHIP</b>
a) <i>Infants (0 to 1)</i>	2007	<u>250</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>19</u> ) (Age range <u>    </u> to <u>    </u> ) (Age range <u>    </u> to <u>    </u> )	2007	<u>250</u> <u>    </u> <u>    </u>
c) <i>Pregnant Women</i>	2007	<u>200</u>

## FORM NOTES FOR FORM 18

None

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 05  
**Field Name:** LowBirthWeight  
**Row Name:** Percent of ow birth weight (<2,500 grams)  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
The "All" rate includes births with unknown payment source.
2. **Section Number:** Indicator 05  
**Field Name:** InfantDeath  
**Row Name:** Infant deaths per 1,000 live births  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
The Medicaid and non-Medicaid infant death rates are based on deaths of infants residing in NYS excluding NYC. The 2006 birth-death match file from NYC has not yet been provided by NYC. The All rate is a statewide rate for all births including births with unknown payment source.
3. **Section Number:** Indicator 05  
**Field Name:** CareFirstTrimester  
**Row Name:** Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
The All rate incudes births with unknown payment source.
4. **Section Number:** Indicator 05  
**Field Name:** AdequateCare  
**Row Name:** Percent of pregnant women with adequate prenatal care  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
The All rate includes births with unknown payment source.



**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: NY**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	3	No
Annual linkage of birth certificates and newborn screening files	3	No
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

\*Where:  
1 = No, the MCH agency does not have this ability.  
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.  
3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: NY**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Other: Youth Tobacco Survey	3	No

\*Where:  
1 = No  
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.  
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

**Notes:**  
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

**FORM NOTES FOR FORM 19**

None

**FIELD LEVEL NOTES**

None

**FORM 20**  
**HEALTH STATUS INDICATORS #01-#05**  
**MULTI-YEAR DATA**  
**STATE: NY**

**Form Level Notes for Form 11**

None

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2003	2004	2005	2006	2007
Annual Indicator	7.9	8.2	8.3	8.3	8.3
Numerator	19,966	20,356	20,367	20,760	20,760
Denominator	253,001	248,876	245,378	249,207	249,204

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

		Annual Indicator Data				
	2003	2004	2005	2006	2007	
Annual Indicator	6.0	6.2	6.4	6.4	6.4	
Numerator	14,691	14,754	15,020	15,253	15,253	
Denominator	243,620	239,013	236,138	239,709	239,709	
Check this box if you cannot report the numerator because						
1. There are fewer than 5 events over the last year, and						
2.The average number of events over the last 3 years is fewer						
than 5 and therefore a 3-year moving average cannot be						
applied.						
(Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?				Final	Provisional	

**Field Level Notes**

1. **Section Number:** Health Status Indicator #01B  
**Field Name:** HSI01B  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
2006 data are being used as a proxy for 2007.

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	1.5	1.6	1.5	1.5	1.5
Numerator	3,869	3,962	3,765	3,849	3,849
Denominator	253,001	248,876	245,378	249,207	249,207
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes**1. **Section Number:** Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 data are being used as a proxy for 2007.

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

		Annual Indicator Data				
	2003	2004	2005	2006	2007	
Annual Indicator	1.1	1.2	1.2	1.2	1.2	
Numerator	2,754	2,804	2,751	2,767	2,767	
Denominator	243,620	239,013	236,138	239,709	239,709	
Check this box if you cannot report the numerator because						
1. There are fewer than 5 events over the last year, and						
2.The average number of events over the last 3 years is fewer						
than 5 and therefore a 3-year moving average cannot be						
applied.						
(Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?				Final	Provisional	

**Field Level Notes**

1. **Section Number:** Health Status Indicator #02B  
**Field Name:** HSI02B  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
2006 data are being used as a proxy for 2007.

**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2003	2004	Annual Indicator Data		
			2005	2006	2007
Annual Indicator	3.4	4.6	3.7	3.7	3.7
Numerator	127	174	138	146	145
Denominator	3,766,916	3,790,880	3,744,186	3,916,635	3,916,635

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes****1. Section Number:** Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

**2. Section Number:** Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**



**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>0.7</u>	<u>2.2</u>	<u>1.3</u>	<u>1.3</u>	<u>1.3</u>
<b>Numerator</b>	<u>27</u>	<u>85</u>	<u>49</u>	<u>50</u>	<u>50</u>
<b>Denominator</b>	<u>3,766,916</u>	<u>3,790,880</u>	<u>3,744,186</u>	<u>3,916,635</u>	<u>3,916,635</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes****1. Section Number:** Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics

**2. Section Number:** Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

2005 data are being used as a proxy for 2006.

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics.

**3. Section Number:** Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics.

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2003	2004	<b>Annual Indicator Data</b>		2007
			2005	2006	
<b>Annual Indicator</b>	12.3	13.0	14.0	14.2	14.2
<b>Numerator</b>	319	338	366	360	360
<b>Denominator</b>	2,592,776	2,606,675	2,620,399	2,543,947	2,543,947

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics.

2. **Section Number:** Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics.

3. **Section Number:** Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

The number of MV related deaths is based on the definition used by the NYS Department of Health, Bureau of Biometrics and Health Statistics.

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2003	2004	Annual Indicator Data		2007
	2005	2006			
Annual Indicator	267.5	284.1	268.9	243.4	243.4
Numerator	10,076	10,771	10,069	9,534	9,534
Denominator	3,766,916	3,790,880	3,744,186	3,916,635	3,916,635

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer  
than 5 and therefore a 3-year moving average cannot be  
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	<b>Annual Indicator Data</b>				
	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
<b>Annual Indicator</b>	<u>12.1</u>	<u>32.5</u>	<u>26.9</u>	<u>28.3</u>	<u>28.3</u>
<b>Numerator</b>	<u>457</u>	<u>1,231</u>	<u>1,020</u>	<u>1,110</u>	<u>1,110</u>
<b>Denominator</b>	<u>3,766,916</u>	<u>3,790,880</u>	<u>3,790,880</u>	<u>3,916,635</u>	<u>3,916,635</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

**1. Section Number:** Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

Non-fatal MV related injuries include pedestrians and cyclists.

**2. Section Number:** Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Non-fatal MV related injuries include pedestrians and cyclists.

**3. Section Number:** Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Non-fatal MV related injuries include cyclist and pedestrians.

**HEALTH STATUS INDICATOR MEASURE # 04C**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	106.7	120.3	118.2	131.6	131.6
Numerator	2,767	3,135	3,097	3,348	3,348
Denominator	2,592,776	2,606,675	2,620,399	2,543,947	2,543,947

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes****1. Section Number:** Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

Non-fatal MV related injuries include pedestrians and cyclists

**2. Section Number:** Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Non-fatal MV related injuries include pedestrians and cyclists.

**3. Section Number:** Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Non-fatal MV related injuries include pedestrians and cyclists.

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2003	2004	<b>Annual Indicator Data</b>		2007
	2005	2006			
<b>Annual Indicator</b>	23.3	25.7	25.6	25.6	25.6
<b>Numerator</b>	15,809	16,279	16,449	17,351	17,351
<b>Denominator</b>	679,390	633,458	643,315	677,708	677,708

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes****1. Section Number:** Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

**2. Section Number:** Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

2004 data are being used as a proxy for 2005.

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	Annual Indicator Data				
	2003	2004	2005	2006	2007
Annual Indicator	6.6	7.7	8.0	11.4	11.4
Numerator	26,142	26,824	27,515	38,939	38,939
Denominator	3,943,484	3,485,833	3,441,631	3,418,040	3,418,040

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer  
than 5 and therefore a 3-year moving average cannot be  
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2006 data are being used as a proxy for 2007.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NY**

**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2006 Is this data from a State Projection? Yes Is this data final or provisional? Final

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	246,083	174,524	53,774	1,914	15,871	0	0	0
Children 1 through 4	990,636	699,961	220,488	8,433	61,754	0	0	0
Children 5 through 9	1,344,135	947,605	308,153	11,334	77,043	0	0	0
Children 10 through 14	1,335,781	952,167	298,432	10,699	74,483	0	0	0
Children 15 through 19	1,289,480	922,010	277,355	9,976	80,139	0	0	0
Children 20 through 24	1,254,467	888,973	257,043	10,017	98,434	0	0	0
Children 0 through 24	6,460,582	4,585,240	1,415,245	52,373	407,724	0	0	0

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	194,221	51,862	0
Children 1 through 4	787,622	203,014	0
Children 5 through 9	1,079,368	264,767	0
Children 10 through 14	1,095,403	240,378	0
Children 15 through 19	1,053,181	236,299	0
Children 20 through 24	994,596	259,871	0
Children 0 through 24	5,204,391	1,256,191	0



**FORM 21**  
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**STATE: NY**

**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2006    Is this data from a State Projection? No    Is this data final or provisional? Final

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	220	95	109	0	2	0	0	14
Women 15 through 17	5,215	2,801	1,995	27	65	0	0	327
Women 18 through 19	12,190	7,096	4,086	51	211	0	0	746
Women 20 through 34	181,553	118,429	37,450	369	16,983	0	0	8,322
Women 35 or older	49,998	35,357	8,565	55	4,443	0	0	1,578
Women of all ages	249,176	163,778	52,205	502	21,704	0	0	10,987

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	123	97	0
Women 15 through 17	2,913	2,290	12
Women 18 through 19	7,551	4,612	27
Women 20 through 34	136,509	44,411	633
Women 35 or older	41,713	8,076	209
Women of all ages	188,809	59,486	881

**FORM 21**  
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**STATE: NY**

**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2006 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	1,391	763	481	4	47	5	0	91
Children 1 through 4	214	130	59	0	14	2	0	9
Children 5 through 9	128	81	37	1	4	1	0	4
Children 10 through 14	137	86	39	0	8	1	0	3
Children 15 through 19	594	411	147	2	18	1	0	15
Children 20 through 24	929	623	238	8	26	2	0	32
Children 0 through 24	3,393	2,094	1,001	15	117	12	0	154

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	1,098	287	6
Children 1 through 4	180	33	1
Children 5 through 9	111	17	0
Children 10 through 14	113	24	0
Children 15 through 19	492	101	1
Children 20 through 24	773	154	2
Children 0 through 24	2,767	616	10

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**STATE: NY**

**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	5,206,115	3,696,267.0	1,158,202.0	42,356.0	309,290.0	0.0	0.0	0.0	2006
Percent in household headed by single parent	34.6	23.2	65.9	56.4	13.5	0.0	42.7	53.4	2006
Percent in TANF (Grant) families	4.1	0.0	0.0	0.0	0.0	0.0	0.0	4.1	2007
Number enrolled in Medicaid	2,021,928	0.0	0.0	0.0	0.0	0.0	0.0	2,021,928.0	2006
Number enrolled in SCHIP	260,436	0.0	0.0	0.0	0.0	0.0	0.0	260,436.0	2007
Number living in foster home care	15,179	0.0	0.0	0.0	0.0	0.0	0.0	15,179.0	2006
Number enrolled in food stamp program	744,778	0.0	0.0	0.0	0.0	0.0	0.0	744,778.0	2006
Number enrolled in WIC	467,187	132,509.0	115,392.0	3,312.0	34,075.0	0.0	6,649.0	175,250.0	2006
Rate (per 100,000) of juvenile crime arrests	1,530.0	0.0	0.0	0.0	0.0	0.0	0.0	1,530.0	2006
Percentage of high school drop-outs (grade 9 through 12)	4.4	0.0	0.0	0.0	0.0	0.0	0.0	4.4	2006

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	4,209,795.0	996,320.0	0.0	2006
Percent in household headed by single parent	0.0	51.4	0.0	2006
Percent in TANF (Grant) families	0.0	0.0	4.1	2007
Number enrolled in Medicaid	0.0	0.0	2,021,928.0	2006
Number enrolled in SCHIP	0.0	0.0	360,436.0	2007
Number living in foster home care	0.0	0.0	15,179.0	2006
Number enrolled in food stamp program	0.0	0.0	744,778.0	2006
Number enrolled in WIC	291,937.0	175,250.0	0.0	2006
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	1,530.0	2006
Percentage of high school drop-outs (grade 9 through 12)	0.0	0.0	4.4	2006

**FORM 21**  
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**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2003    Is this data from a State Projection? No    Is this data final or provisional? Final

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	4,794,878
Living in urban areas	479,878
Living in rural areas	416,373
Living in frontier areas	0
<b>Total - all children 0 through 19</b>	<b>896,251</b>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

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**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2006    Is this data from a State Projection? No    Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Total Population	19,021,000.0
Percent Below: 50% of poverty	6.3
100% of poverty	14.0
200% of poverty	31.9

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**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2006    Is this data from a State Projection? No    Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	5,037,000.0
Percent Below: 50% of poverty	8.7
100% of poverty	19.0
200% of poverty	39.4

## FORM NOTES FOR FORM 21

Births to women of all ages excludes births to women with unknown age.

### FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_TANFPercent  
**Row Name:** Percent in TANF (Grant) families  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
The rate is based on kids through age 18 since TANF includes kids up to age 18.
2. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Data represents SCHIP enrollment for March 2008.
3. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_JuvenileCrimeRate  
**Row Name:** Rate (per 100,000) of juvenile crime arrests  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Data includes 24,569 arrests for violent and property index crimes in NYS outside of NYC among kids 10-19. The rate is based on a population figure of 1,602,877 kids in Upstate NY. NYC data are unavailable.
4. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_DropOutPercent  
**Row Name:** Percentage of high school drop-outs (grade 9 through 12)  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Dropout rates are for Public School students for the 2005/2006 school year.